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CONFIRMATION NO. 1432

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| SERIAL NUMBER<br>10/500,516 | FILING DATE<br>06/29/2004<br><br>RULE | CLASS<br>549 | GROUP ART UNIT<br>1625 | ATTORNEY<br>DOCKET NO.<br>X-14685 |
|-----------------------------|---------------------------------------|--------------|------------------------|-----------------------------------|

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## \*\* CONTINUING DATA \*\*\*\*\*

This application is a 371 of PCT/US02/21296 07/29/2002  
 which claims benefit of 60/350,152 01/17/2002

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

|  |   |  |                        |                        |                            |
|--|---|--|------------------------|------------------------|----------------------------|
| Foreign Priority claimed<br>35 USC 119 (a-d) conditions met<br>Verified and Acknowledged | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance<br>Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i> | STATE OR<br>COUNTRY<br>UNITED<br>KINGDOM | SHEETS<br>DRAWING<br>0 | TOTAL<br>CLAIMS<br>116 | INDEPENDENT<br>CLAIMS<br>1 |
|--|---|--|------------------------|------------------------|----------------------------|

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TITLE

## Modulators of acetylcholine receptors

|   |  |   |                                   |   |   |  |                                      |                                 |
|---|--|---|-----------------------------------|---|---|--|--------------------------------------|---------------------------------|
| <p>FILING FEE<br/><br/>RECEIVED<br/>2938</p>                      | <p>FEES: Authority has been given in Paper<br/>No. _____ to charge/credit DEPOSIT ACCOUNT<br/>No. _____ for following:</p> | <table border="1"><tr><td><input type="checkbox"/> All Fees</td></tr><tr><td><input type="checkbox"/> 1.16 Fees ( Filing )</td></tr><tr><td><input type="checkbox"/> 1.17 Fees ( Processing Ext. of<br/>time )</td></tr><tr><td><input type="checkbox"/> 1.18 Fees ( Issue )</td></tr><tr><td><input type="checkbox"/> Other _____</td></tr><tr><td><input type="checkbox"/> Credit</td></tr></table> | <input type="checkbox"/> All Fees | <input type="checkbox"/> 1.16 Fees ( Filing ) | <input type="checkbox"/> 1.17 Fees ( Processing Ext. of<br>time ) | <input type="checkbox"/> 1.18 Fees ( Issue ) | <input type="checkbox"/> Other _____ | <input type="checkbox"/> Credit |
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